

SENDER WILL CHECK CLASSIFICATION TOP AND BOTTOM			
UNCLASSIFIED	CONFIDENTIAL SECRET		
OFFICIAL ROUTING SLIP			
TO	NAME AND ADDRESS	DATE	INITIALS
1	DD/Sec.	9/30	[Signature]
2			
3	[Signature]		
4			
5			
6			
<input type="checkbox"/> ACTION	<input type="checkbox"/> DIRECT REPLY	<input type="checkbox"/> PREPARE REPLY	
<input type="checkbox"/> APPROVAL	<input type="checkbox"/> DISPATCH	<input type="checkbox"/> RECOMMENDATION	
<input type="checkbox"/> COMMENT	<input type="checkbox"/> FILE	<input type="checkbox"/> RETURN	
<input type="checkbox"/> CONCURRENCE	<input type="checkbox"/> INFORMATION	<input type="checkbox"/> SIGNATURE	
Remarks: <div style="font-size: 1.2em; margin-top: 20px;">#3 File, please.</div> <div style="text-align: right; margin-top: 10px;">[Signature]</div>			
FOLD HERE TO RETURN TO SENDER			
FROM: NAME, ADDRESS AND PHONE NO.			DATE
Executive Officer			30 SEP 1971
UNCLASSIFIED	CONFIDENTIAL SECRET		

FORM NO. 1-67

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Use previous editions

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